2007-678

PERSONAL FINANCIAL DISCLOSURE FORM

20070677

1. FULL NAME Arthur Daniel Nichols	2. SPOUSE'S FULL NAME None
3. RESIDENCE ADDRESS 2256 Hwy. 20 Donaldsonville La 70346	
4. SPOUSE'S OCCUPATION (If any)	
5. PRINCIPAL BUSINESS ADDRESS Same	

6. THIS REPORT COVERS CALENDAR YEAR 2006 - 9-6-07. CHECK IF AMENDED REPORT ______

NOTE: Where amounts are required herein, indicate such amounts by use of one of the following categories:

I - less than $5,000;
II - $5,000 to $24,999;
III - $25,000 to $49,999;
IV - $50,000 to $99,999;
V - $100,000 to $199,999;
VI - $200,000 or more.

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RECEIVED

Use as many pages of each section of the form as are required. Machine copies of the form's pages may be used. Complete all sections (if not applicable, so indicate). Please type or print.

8. AFFIDAVIT

I do hereby certify, after having been first duly sworn, that the information contained in this personal financial disclosure form is true and correct to the best of my knowledge, information, and belief.

Arthur D. Nichols
PERSON FILING REPORT

Sworn to and subscribed before me this 6th day of September, 2007.

William E. Crawford, Jr.
NOTARY PUBLIC
William E. Crawford, Jr., Bar No. 24061

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LOUISIANA BOARD OF ETHICS
2415 QUAIL DRIVE
THIRD FLOOR
BATON ROUGE, LA 70808

Rec'd 2007 Sept. 6 2:14 pm

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A. POSITIONS

The name, address of, position in, and amount of interest in each business in which you or your spouse (either individually or collectively) were a **director, officer, partner, member, or trustee** during the calendar year. (NOTE: For purposes of this section "business" is defined as any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF BUSINESS	3. POSITION	4. AMOUNT
X INDIVIDUAL ____ SPOUSE ____ BOTH	2256 Hwy 20, [illegible] Sunshine Lounge	owner	[illegible] I To II
____ INDIVIDUAL ____ SPOUSE ____ BOTH			
____ INDIVIDUAL ____ SPOUSE ____ BOTH			
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____ INDIVIDUAL ____ SPOUSE ____ BOTH			

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B. BUSINESS INTERESTS

The name, address and amount of interest in each business with which your sole relationship during the calendar year was as an owner of an interest in excess of 10% held by you or your spouse (either individually or collectively). (NOTE: For purposes of this section "business" is defined as any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF BUSINESS	3. AMOUNT
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
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____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		

C. INCOME

The name, address, type and amount of each source of income in excess of $1,000 received by you or your spouse (either individually or collectively) during the calendar year. "Income" means any income from whatever source derived, including but not limited to the following types: compensation for services, including fees, salaries, commissions, and similar items; income derived from business; gains derived from dealings in property; interest; rents; royalties; dividends; annuities; income from life insurance and endowment contracts; pensions; income from discharge of indebtedness; distributive share of partnership income; and income from interest in an estate or trust. For income from compensation, give a very brief description of the services rendered. For income from mental health, medical health, or legal services, if the disclosure of the source of the income would reveal the identity of a patient or client, then either mental health, medical health, or legal services should be given as the source.

1. INDIVIDUAL, SPOUSE OR BOTH	2. NAME AND ADDRESS OF SOURCE OF INCOME	3. TYPE	4. AMOUNT	5. DESCRIPTION OF SERVICES
✓ INDIVIDUAL ___ SPOUSE ___ BOTH	Sunshine Lounge 2256 Hwy 70 Donaldsonville LA 70346	Business	I to II	Owner Lounge
___ INDIVIDUAL ___ SPOUSE ___ BOTH	Union Pension	Pension	I	
___ INDIVIDUAL ___ SPOUSE ___ BOTH	Social Security	Pension	II	
___ INDIVIDUAL ___ SPOUSE ___ BOTH				
___ INDIVIDUAL ___ SPOUSE ___ BOTH				
___ INDIVIDUAL ___ SPOUSE ___ BOTH				
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___ INDIVIDUAL ___ SPOUSE ___ BOTH				
___ INDIVIDUAL ___ SPOUSE ___ BOTH				

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D. REAL ESTATE HOLDINGS

The address and a short description (i.e., size, use of land) of each parcel of real property having a fair market value in excess of $2,000 in which you or your spouse (either individually or collectively) had an interest during the calendar year.

1. INDIVIDUAL, SPOUSE OR BOTH	2. ADDRESS OF REAL PROPERTY	3. DESCRIPTION
_✓_ INDIVIDUAL ____ SPOUSE ____ BOTH	N/A	
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
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____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		

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E. TRANSACTIONS

A brief description, the date, and amount of each <u>purchase, sale, exchange, donation, or gift, other acquisition or disposition</u>, in excess of $1,000, by you or your spouse (either individually or collectively) during the calendar year in any real property, and of any stocks, bonds, commodities futures, or other forms of securities, including but not limited to, any option to acquire and/or dispose of any stocks, bonds, commodities futures, other forms of securities, negotiable instruments, movable or immovable property, or any other interest.

1. INDIVIDUAL, SPOUSE OR BOTH	2. DESCRIPTION	3. DATE	4. AMOUNT
X INDIVIDUAL ___ SPOUSE ___ BOTH	N/A		
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
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___ INDIVIDUAL ___ SPOUSE ___ BOTH			

F. LIABILITIES

The name, address, and amount of each liability in excess of $10,000 owed to any creditor by you or your spouse (either individually or collectively) during the calendar year. (NOTE: Exclude any loan secured by a personal motor vehicle, household furniture, or appliances if such loan does not exceed the purchase price of the item that secures it.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF CREDITOR	3. AMOUNT
____ INDIVIDUAL ____ SPOUSE ____ BOTH	Dow Chemical of the Credit union	I
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
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